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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/528,284	08/29/2005	Walter Keller	0740-70	6605
	5 7590 12/19/2008 HE MAXHAM FIRM		EXAMINER	
9330 SCRANT	ON ROAD, SUITE 35		NOORISTANY, SULAIMAN	
SAN DIEGO, CA 92121			ART UNIT	PAPER NUMBER
			2446	
			MAIL DATE	DELIVERY MODE
			12/19/2008	PAPER

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Interview Summary	10/528,284	KELLER, WALTI	ΞR
interview Summary	Examiner	Art Unit	
	SULAIMAN NOORISTANY	2446	
All participants (applicant, applicant's representative, PTO	personnel):		
(1) <u>SULAIMAN NOORISTANY</u> .	(3) <u>Mr. Collin</u> .		
(2) <u>Ashok Patel</u> .	(4)		
Date of Interview: <u>16 December 2008</u> .			
Type: a)⊠ Telephonic b)⊡ Video Conference c)⊡ Personal [copy given to: 1)⊡ applicant 2	2)∏ applicant's representative	e]	
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e) No.		
Claim(s) discussed: <u>13-20</u> .			
Identification of prior art discussed: <u>5999967</u> , <u>6249805</u> .			
Agreement with respect to the claims f) was reached. g)⊠ was not reached. h)□ N	I/A.	
Substance of Interview including description of the general reached, or any other comments: <u>Did not reach any agreen</u>	<u>ment</u> .	-	
(A fuller description, if necessary, and a copy of the amend allowable, if available, must be attached. Also, where no callowable is available, a summary thereof must be attached.	opy of the amendments that w		
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE A INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER INTERVIEW DATE, OR THE MAILING DATE OF THIS INT FILE A STATEMENT OF THE SUBSTANCE OF THE INTERPOLITIES ON REVERSE SIDE OF ON Attached sheet.	last Office action has already OF ONE MONTH OR THIRTY ERVIEW SUMMARY FORM, '	been filed, APP / DAYS FROM T WHICHEVER IS	LICANT IS THIS LATER, TO
(O.N.)			
/S. N./			

Application No.

Applicant(s)